

129-L-002

# PLUMBING APPLICATION

## PROPERTY ADDRESS

Town Or Plantation: Portland

Street Subdivision Lot #: 671 Forest Ave

## PROPERTY OWNERS NAME

Last: GUIDI First: JOSEPH

Applicant Name: John R. Brevenig

Mailing Address of Owner/Applicant (If Different): 36 Church St. Scarborough, ME 04074

PORTLAND Date Permit Issued: 5-20-98 6487 TOWN COPY  Double Fee Charged

Arthur Now Local Plumbing Inspector # 1124

### Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

John R. Brevenig 5-20-98  
Signature of Owner/Applicant Date

### Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Arthur Now 8/5/98  
Local Plumbing Inspector Signature Date Approved

## PERMIT INFORMATION

This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER — SPECIFY <u>Retail</u>	1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>L 611812</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 Number Type of Fixture
<input checked="" type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> <input checked="" type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		
<b>OR</b> <input type="checkbox"/> TRANSFER FEE [\$6.00]		
	Hosebibb / Silcock	Bathtub (and Shower)
	Floor Drain	Shower (Separate)
	Urinal	2 Sink
	Drinking Fountain	1 Wash Basin
	Indirect Waste	Water Closet (Toilet)
	Water Treatment Softener, Filter, etc.	1 Clothes Washer
	Grease / Oil Separator	Dish Washer
	Dental Cuspidor	Garbage Disposal
	Bidet	Laundry Tub
	Other: _____	Water Heater
	<b>Fixtures (Subtotal) Column 2</b>	<b>Fixtures (Subtotal) Column 1</b>
		<b>Fixtures (Subtotal) Column 2</b>
		<b>Total Fixtures</b>
		<b>Fixture Fee</b>
		<b>Transfer Fee</b>
		<b>Hook-Up &amp; Relocation Fee</b>
		<b>Permit Fee (Total)</b>

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

\$ 4  
\$  
\$  
\$  
\$ 16.00